

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000165196

**Entity Name:** SEA FORCE IX OF PALM BEACH CHARTER COMPANY, INC.**Current Principal Place of Business:**6110 NORTH OCEAN BLVD #37  
BOYNTON BEACH, FL 33435**Current Mailing Address:**C/O DAVID PITCHFORD  
600 N HURSTBOURNE PARKWAY SUITE 300  
LOUISVILLE, KY 40222**FEI Number:** 20-3975126**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HAFT, STUART JESQ  
C.O ALLEY MAASS ROGERS & LINDSAY, P.A.  
340 ROYAL POINCIANA WAY STE321  
PALM BEACH, FL 33480 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	DC
Name	NICHOLS, J D
Address	600 N HURSTBOURNE PARKWAY SUITE 300
City-State-Zip:	LOUISVILLE KY 40222

Title	DP
Name	LAVIN, BRIAN F
Address	600 N HURSTBOURNE PARKWAY SUITE 300
City-State-Zip:	LOUISVILLE KY 40222

Title	EVP
Name	WELLS, GREGORY A
Address	600 N HURSTBOURNE PARKWAY SUITE 300
City-State-Zip:	LOUISVILLE KY 40222

Title	VPT
Name	PITCHFORD, DAVID B
Address	600 N HURSTBOURNE PARKWAY SUITE 300
City-State-Zip:	LOUISVILLE KY 40222

Title	SVP, SECRETARY
Name	TAFEL, ROSANN D ESQ.
Address	600 N HURSTBOURNE PARKWAY STE 300
City-State-Zip:	LOUISVILLE KY 40222

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ROSANN D TAFEL

GENERAL COUNSEL

04/01/2013

Electronic Signature of Signing Officer/Director Detail

Date